

ABSTRACT

INTRODUCTION

Patients with type 2 diabetes are more prone to be diagnosed with benign prostatic hyperplasia than general male population. Abnormalities of glucose homeostasis plays a role in causation of benign prostatic hyperplasia by influencing the proliferation rate of prostate cells.

AIMS AND OBJECTIVES

1. To study the prevalence of prostatomegaly in patients with type 2 diabetes
2. To study the effect of prostatomegaly and its complications with the duration and glycemic control in type 2 diabetic patients.

MATERIALS AND METHODS

Among 100 patients attending Diabetology OP department and Institute of Internal medicine, an observational study was done for a period of 6 months. These patients were selected based on the inclusion criteria – type 2 diabetes in the age group of 40- 60 years and exclusion criteria- known case of benign prostatic hyperplasia and prostatic carcinoma.

Demographic data and medical history were obtained from the patients and they were subjected to blood sugar estimations(FBS / PPBS) ,HbA1c, serum prostate specific antigen (for selected patients) , ultrasound of pelvis.

RESULTS

Out of 100 diabetic patients involved in the study, 51% patients had prostatomegaly and out of 51 patients with prostatomegaly, 27 patients had lower urinary tract symptoms (52%).

Among patients with diabetes for a duration more than 10 years, 63% had prostatomegaly. Similarly, patients with poor glycemic profile had higher prevalence of prostatomegaly compared to general population.

CONCLUSION

It has become evident from our study that, the presence of prostatomegaly correlates well with the glycemic profile and the duration of diabetes with the prevalence being increased in the age group of 40 -60 years.

KEYWORDS

BENIGN PROSTATIC HYPERPLASIA

TYPE 2 DIABETES MELLITUS

LOWER URINARY TRACT SYMPTOMS

GLYCEMIC CONTROL.